1422-0508P

PLEASE NOTE: YOU MUST COMPLETE THE POLLOWING

BIRCH, STEWART, KOLASCH & BIRCH, LLP P.O. Box 747 • Falls Church, Virginia 22040-0747 Telephone: (703) 205-8000 • Facsimile: (703) 205-8050

## COMBINED DECLARATION AND POWER OF ATTORNEY FOR PATENT AND DESIGN APPLICATIONS

As a below named inventor, I hereby declare that my residence, post office address and citizenship are as stated next to my name; inventor (if plural inventors are named below) or an original, first and sole inventor (if plural inventors are named below) or an original first and injections. he

Insert Title:	invention entitled:	ETHOD OF STE	RILIZING P	which is claimed and for who out of the output of the outp	Process	- washir or		
Fill in Appropriation - For Use Without	the specification of wh	nich is attached hereto. If no	t attached hereto.	204				
Specification	and amended on					;		
Attached:	the specification v International Apr	was filed on				le) and/or _as PCT		
	amended under t	CT Article 19 on			1:6	and was		
	amended by any amendment referred to above.  I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Fed.  I do not be now and do not be the contents of the above identified specification, including the claims of the contents of the above identified specification, including the claims of the contents of the above identified specification, including the claims of the contents of the above identified specification, including the claims of the above identified specification including the claims of the above identified specified including the claims of the above identified specified specified in the above identified in the above identified specified in the above identified in the abo							
	prior to this application date of this application representative or assign patent or inventor's cerapplication by me or my I hereby claim for or inventor's certificate or inventor's certificate.	tation, that the same was re- t, that the invention has non- n in any country foreign as more than twelve month inficate on this invention have legal representatives or as	to in public use or of the United States to the United States is (six months for der a been filed in any co signs, except as follow Title 35, United State	n sale in the United States of ide the subject of an inventor's of America on an application signs) prior to this application	America more continues continues in filed by mand that no a sates of America	than one your dealers than one your before the or the legislation of the prior to the state of the legislation of the legislati		
Insert Priority	Prior Foreign Applica				Dari a arisa d	<b>.</b> .		
information:	2001-303238	Japan	Sent	ember 28, 2001	Priority (	laimed		
(If appropriate)	(Number)	(Country)		t/Day/Year Filed)	X Yes	□ No		
	(Number)	(Country)	(Monti	1/Day/Year Filed)	☐ Yes	□ No		
	(Number)	(Country)	(Month	/Day/Year Filed)	☐ Yes	□ No		
	(Number)	(Country)	(Month	/Day/Year Filed)	☐ Yes	□ No		
	I hereby claim the benefit under Title 35, United States Code, §119(e) of any United States provisional applications(s) listed below.							
Application(s): (if any)	(Application Number)		(Еш	ng Date)				
	(Application Number)		(File	ng Date)		<del></del>		
	All Foreign Applications, if any, for any Patent or Inventor's Certificate Filed More than 12 Months (6 Months for Designs) Prior to the Filing Date of This Application:							
	Country	Application N	iumber	Date of Filing (Month/D	24/YA24\			
insert Requested Information: (if appropriate)						_		
neert Prior U.S.	information which is make	provided by the first paragr	aph of Title 35, Unite	nited States and/or PCT applie not disclosed in the prior U d States Code, §112, I acknow le of Federal Regulations, §1.5 national filing date of this app	ruted States at ledge the duty	1/1/00 PK T		
application(s):	(Application Number)	(Filing Date)		(Status - patented, pendir	g abandoned)	<del></del>		
lage 1 of 2 Rev. 06/29/01)	(Application Number)	(Filing Date)		(Status - patented, pendin	g abandoned)	<del></del>		

I hereby appoint the practitioners at CUSTOMER NO. 2292 as my attorneys or agents to prosecute this application and/or an international application based on this application and to transact all business in the United States Patent and Trademark Office c nnected therewith and in connection with the resulting patent based on instructions received from the ntity who first sent the application papers to the practitioners, unless the inventor(s) r assignee provides said practitioners with a written hotice to the contrary:

Send Correspondence to:

## BIRCH, STEWART, KOLASCH & BIRCH, LLP or CUSTOMER NO. 2292

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

ed Name of First or Sole Investor: purt Name of	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE		DATE				
cost Neme of Investor	Kazuo IWAI	12405		Dec. 18, 200/				
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ill Name of Second Erverstor, et eay: eacr above	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE	INVENTOR'S SIGNATURE					
	Residence (City, State & Country)	CITIZENSHIP						
	MAILING ADDRESS (Complete Street Address including City, State & Country)							
of Name of Third Inventor, if any: see above	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE		DATE*				
	Residence (City, State & Country)	CITIZENSHIP -						
	MAILING ADDRESS (Complete Street Address including City, State & Country)							
Il Name of Fourth (oversion, if any: um altore	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE		DATE				
	Residence (City, State & Country)	CTTIZENSHIP						
	MAILING ADDRESS (Complete Street Address including City, State & Country)							
B Name of Fifth progetor, if any; one above	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE		DATE*				
	Residence (City, State & Country)	CITIZENSHIP						
	MAILING ADDRESS (Complete Street Address including City, State & Country)							
de Name of Stoth Inventor, if anys see obtava	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE		DATE*				
	Residence (City, State & Country)	CITIZENSHIP						
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